MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 1080739 6   FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
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47		1				
48		1				
49	1					
50		1				
TOTAL IND.	7					
TOTAL DEP.	37					
TOTAL CLAIMS	44					

		IND	DEP	IND	DEP	IND	DEP
	51	1					
	52		1				
	53	1					
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	100						
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							